

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	6-11	19	07/27/01
O.I.P.E. CLASSIFIER			8/18/01
FORMALITY REVIEW	L-I	106	8/13/01
RESPONSE FORMALITY REVIEW	TA	1113	1-17-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted 0 ..... Objected

Claim	Date		
Final	Original	5	10
1	✓	✓	✓
2	✓	✓	✓
3	0	0	0
4	0	0	0
5	0	0	0
6	✓	✓	✓
7	0	0	0
8	0	0	0
9	0	0	0
10	✓	✓	✓
11	✓	✓	✓
12	✓	✓	✓
13	✓	✓	✓
14	✓	✓	✓
15	N		
16			
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24			
25	✓		
26	N		
27	✓	✓	✓
28	N		
29	✓	N	
30	-	N	
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Claim	Date		
Final	Original	5	10
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Claim	Date		
Final	Original	5	10
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If more than 150 claims or 10 actions  
staple additional sheet here

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